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APPLICANTS

BRIAN D. LOUNSBERRY, THIENSVILLE, WI; *TL*JONATHAN R. SCHMIDT, WALES, WI; *TL*STEPHEN W. GRAVELLE, MEQUON, WI; MICHAEL S. IDELCHIK, MEQUON, WI; *TL*
JAMES S. SHEPARD, MONTCLAIR, NJ; *TL*** CONTINUING DATA *TL*** FOREIGN APPLICATIONS *TL*

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	WI	DRAWING 7	22	2
Verified and Acknowledged	Examiner's Signature <i>TL</i> Initials <i>TL</i>				

ADDRESS

PAUL S HUNTER
 FOLEY & LARDNER
 FIRSTAR CENTER
 777 EAST WISCONSIN AVENUE
 MILWAUKEE , WI
 532025367

23 5

TITLE

METHOD AND APPARATUS FOR ASSOCIATING A FIELD REPLACEABLE UNIT WITH A MEDICAL DIAGNOSTIC SYSTEM AND RECORDING OPERATIONAL DATA

<input type="checkbox"/> All Fees
<input type="checkbox"/> 1.16 Fees (Filing)
<input type="checkbox"/> 1.17 Fees (Processing Ext. of

FILING FEE FEES: Authority has been given in Paper